

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Citizens for Ako Abdul-Samad

IMPORTANT: Indicate by # type of committee you are reporting for: ☐

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Ako Abdul-Samad

Political Party (if applicable)

Democrat

Office Sought

State Representative

District (if Senate or House)

66

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE  
REPORT

**For Office Use Only**

Comm. # 1604

Logged In \_\_\_\_\_

Scanned \_\_\_\_\_

Computer WRS

Audited created by auditor

to adjust balances  
per prior amendment

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A \_\_\_\_\_ REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # ☐

☒ CHECK IF AMENDMENT TO REPORT DATED October 19, 2006

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the  
committee. This amount **MUST** be the same as the cash on hand at the end  
of the last reporting period or must be zero if this is first report filed.)

\$ 1,052.52

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

5,010.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL**.....\$

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

2,572.23

Schedule F: Loan Repayments total (Attach Schedule F)

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$ 3,490.29

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$ 449.79

**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 125.00

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

YES ☒ NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$ 0.00

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Citizens for Ako Abdul-Samad

**IMPORTANT:** Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Ako Abdul-Samad

Political Party (if applicable)

Democrat

Office Sought

State Representative

District (if Senate or House)

66

<b>FORM</b> <b>DR-2</b> (Rev. 07/2007)	<b>DISCLOSURE</b> <b>REPORT</b>
<b>For Office Use Only</b>	
Comm. #	<u>1604</u>
Logged In	<u>✓</u>
Scanned	<u>✓</u>
Computer	<u>WKS</u>
Audited	<u>3-25-08</u>

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

[Signature]  
**SIGNATURE OF PERSON FILING REPORT**

515.419.1151  
**TELEPHONE**

26 Dec 07  
**DATE SIGNED**

I AM FILING A \_\_\_\_\_ REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # ☐

☒ CHECK IF AMENDMENT TO REPORT DATED October 19, 2006

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

952.52

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

5010.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL**

\$

5962.52

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

2572.23

Schedule F: Loan Repayments total (Attach Schedule F)

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$

3390.29

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$

449.79

**\*\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$

125.00

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

YES ☒ NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$

0.00

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Ato Abdul-Samad

IMPORTANT: Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other  
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political  
Subdivision PAC (11) Local Ballot Issue Committee

CANDIDATE COMMITTEES ONLY

Candidate Name

Ato Abdul-Samad

Political Party (if applicable)

Democrat

Office Sought

State Representative

District (if Senate or House)

66

FORM

DR-2

(Rev. 12/2005)

DISCLOSURE  
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

File with:

Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-3701

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A

October 19, 2006

(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

### STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

#### ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

#### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

1047.99

852.52

5010.00

5010.00

6057.99

5862.52

2564.28

2572.23

3493.71

3290.29

449.79

125.00

YES ☒ NO

0.00

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

# EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Ako Abdul-Samad

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/28/2006	ID# CK#	Dan McFall 1102 Grand Ave. West Des Moines, IA 50265	Reimbursement for fundraiser food	\$ 500.00
9/29/2006	ID# CK#	Carter Printing 1739 East Grand Ave. Des Moines, IA 50316	Printing costs for campaign materials	954.74
9/29/2006	ID# CK#	Sisters on Target	Tickets for table at event (Annual banquet)	200.00
10/13/2006	ID# 9048 CK#	House Truman Fund 5661 Fleur Dr. Des Moines, IA 50321	Voter file fee	500.00
8/15/06	ID# CK#	Wells Fargo Bank 666 Walnut Street Des Moines IA 50309	bank maintenance fee	2.65
9/18/06	ID# CK#	↓	↓	2.65
10/17/06	ID# CK#	↓	↓	2.65
	ID# CK#			

SUB-TOTAL \$ 2162.69  
TOTAL (If last page of this schedule) \$ 2572.23

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 2 of 2

(for Schedule B)

## DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Ato Abdul-Samad

IMPORTANT: Indicate by # type of committee you are reporting for: 1(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other  
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political  
Subdivision PAC (11) Local Ballot Issue Committee

CANDIDATE COMMITTEES ONLY

Candidate Name

Ato Abdul-Samad

Political Party (if applicable)

Democrat

Office Sought

State Representative

District (if Senate or House)

66

FORM  
DR-2

(Rev. 12/2005)

DISCLOSURE  
REPORT

For Office Use Only

Comm. #

11404

Logged In

S 2

Scanned

Computer

WRS

Audited

9.17.07

File with:

Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-3701

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A

October 19, 2006

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

(report date)

Indicate by # 1☐ CHECK IF AMENDMENT TO REPORT DATED

See amended report

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County &amp; Local Committees, enter County in which Election is held

## STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

1047.99

## ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

5010.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

6057.99

## SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

2564.28

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

3493.71

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

449.79

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

125.00

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

## CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

**CONTRIBUTIONS – MONEY TAKEN IN**  
(Including candidate's personal funds)

**COMMITTEE NAME (Must be same as on Statement of Organization)**  
**Citizens for Ako Abdul-Samad**

**SCHEDULE**  
**A** **Monetary**  
(Rev. 07/03) **Receipts**

Check this box if  
amending form

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or any commercial purpose by any person other than statutory political committees.

Date Received (MM/DD/YR)	PAC ID number (if applicable) and PAC Check number	Name and Address of Contributor	Relationship to Candidate* (if applicable)	Amount Received	✓ if for Fund-raiser Income
11/19/2006	ID # 8466 CK # 2086	All America PAC 607 14th St. NW, Ste. 800 Washington, DC 20005		250.00	
7/27/2006	ID # 6021 CK # 2043	Credit Union PAC PO Box 10409 Des Moines, IA 50306		250.00	
7/29/2006	ID # CK #	Kim Stephens		20.00	
8/1/2006	ID # CK #	Richard Murphy 3800 Crestmoor Pl. Des Moines, IA 50310		50.00	
8/2/2006	ID # 6116 CK # 1606	Equipment Dealers Association PAC 1311 50th St., PO Box 65840 West Des Moines, IA 50265		100.00	
8/2/2006	ID # 6082 CK # 1136	MidAmerican Energy Effective Government Committee 666 Grand Ave., PO Box 657 Des Moines, IA 50303		250.00	
8/7/2006	ID # CK #	Jeffrey Goetz 701 54th St. Des Moines, IA 50312		25.00	
8/7/2006	ID # CK #	Phillip Roeder 110 Lincoln Place Dr. Des Moines, IA 50312		50.00	
8/7/2006	ID # CK #	Kyle Lobner 2925 Brattleboro Ave. Des Moines, IA 50311		50.00	
8/7/2006	ID # CK #	Sophie Vlassis 5001 Lyndale Dr. Des Moines, IA 50310		100.00	
Sub-total				1145.00	
Total (if last page of this schedule)				\$	

\*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationships must be shown to the third degree of consanguinity (blood relative) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

**CONTRIBUTIONS – MONEY TAKEN IN**  
(Including candidate's personal funds)

**COMMITTEE NAME (Must be same as on Statement of Organization)**  
**Citizens for Ako Abdul-Samad**

**SCHEDULE**  
**A**  
(Rev. 07/03) **Monetary Receipts**

Check this box if  
amending form

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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Date Received (MM/DD/YR)	PAC ID number (if applicable) and PAC Check number	Name and Address of Contributor	Relationship to Candidate* (if applicable)	Amount Received	✓ if for Fund-raiser Income
<del>8/7/2006</del>	ID #	Sophie Viassis 5001 Lyndale Dr.		100.00	
	CK #	Des Moines, IA 50310			
8/7/2006	ID #	Jean Basinger 1335 48th St.		250.00	
	CK #	Des Moines, IA 50311			
8/7/2006	ID #	Cynthia Hunafa 1318 College Ave.		50.00	
	CK #	Des Moines, IA 50314			
8/7/2006	ID #	Jane Magers 1922 Lincoln Ave.		15.00	
	CK #	Des Moines, IA 50314			
9/14/2006	ID # 6058 CK # 2958	Iowa Chiropractic Society PAC 1605 N. Ankeny Blvd., Ste. 100 Ankeny, IA 50023		200.00	
9/14/2006	ID # 6070 CK # 3361	Iowa Lawpac 303 Locust St., Ste. 400 Des Moines, IA 50309		150.00	
9/15/2006	ID # 8470 CK # 1822	Keeping America's Promise 607 14th St. NW, Ste. 800 Washington, DC 20005		500.00	
9/19/2006	ID # 6084 CK # 4490	Associated General Contractors of Iowa 701 E. Court Avenue Des Moines, IA 50309		1500.00	
9/22/2006	ID # 8504 CK # 2615	Forward Together PAC 201 North Union Street Alexandria, VA 22314		1000.00	
10/3/2006	ID # 8026 CK # 10768	IBEW Educational Committee 900 Seventh St., NW Washington, DC 20001		200.00	
Sub-total				<del>3965.00</del> 3865.00	
Total (if last page of this schedule)				\$ 5010.00	

\*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationships must be shown to the third degree of consanguinity (blood relative) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Citizens for Alko Abdul-Samad

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/26/2006	ID# CK#	Dawn Thomas 1506 18 <sup>th</sup> St. Des Moines, IA 50314	Reimbursement for fundraiser refreshments	\$ 34.78
7/28/2006	ID# CK#	Des Moines Rental 4711 University Des Moines, IA 50311	Tarp rental for fundraiser	116.00
7/18/2006	ID# CK#	US Postal Service Des Moines Main Post Office Des Moines, IA 50318	Postcard postage	48.00
7/28/2006	ID# CK#	HyVee 3330 ML King Pkwy Des Moines, IA 50314	Food for fundraiser	39.00
8/2/2006	ID# CK#	US Postal Service Main Post Office Des Moines, IA 50318	Postcard postage	24.00
9/17/2006	ID# CK#	Alko Abdul-Samad 1506 18 <sup>th</sup> St. Des Moines, IA 50314	Reimbursement for event	60.00
9/16/2006	ID# CK#	Walmart 1001 73 <sup>rd</sup> St. Windsor Heights, IA 50311	telephone purchase	52.76
9/18/2006	ID# CK#	DMACC 2006 S. Ankeny Blvd. Ankeny, IA 50021	Candidate forum event	35.00
SUB-TOTAL				\$ 409.54
TOTAL (if last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

## EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Citizens for Ako Abdul-Samad

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/28/2006	ID# CK#	Dan McFall 1102 Grand Ave. West Des Moines, IA 50265	Reimbursement for fundraiser food	\$ 500.00
9/29/2006	ID# CK#	Carter Printing 1739 East Grand Ave. Des Moines, IA 50316	Printing costs for campaign materials	954.74
9/29/2006	ID# CK#	Sisters on Target	Tickets for table at event (Annual banquet)	200.00
✓ 10/13/2006	ID# 9048 CK#	House Truman Fund, IDP 5661 Fleur Dr. Des Moines, IA 50321	Voter file fee	500.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 2154.74
TOTAL (if last page of this schedule)				\$ 2564.28

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 2 of 2

(for Schedule B)

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Ato Abdul-Samad

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

SCHEDULE

D

(Rev. 08/98)

INCURRED  
INDEBTEDNESS☐ CHECK THIS BOX  
IF AMENDING  
FORM**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
7/16/2006	Joseph Jones 6750 School St., #201 Windsor Heights, IA 50311	Reimbursement for Calendars	\$ 14.83
7/25/2006	Nextel Partners PO Box 4192 Carol Stream, IL - 60197-4192	Cancellation of cell phone	140.42
9/1/2006	Internet Corporation Listing Service 2530 Berryessa Rd., #912 San Jose, CA 95132	Campaign website listing	35.00
9/23/2006	Nextel Partners PO Box 4192 Carol Stream, IL 60197-4192	Campaign phone	259.54
SUB-TOTAL			\$ 449.79
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 449.79

\*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1  
(for Schedule D)**CANDIDATE COMMITTEES NOTE:**

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Ato Abdul-Samad

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND

CONTRIBUTIONS

☐ CHECK THIS BOX IF AMENDING FORM

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
9/25/2006	Debra Peek 1808 Woodland Ave. Des Moines, IA 50309		tickets	\$ 25.00	<input type="checkbox"/>
9/12/2006	South Central Federation of Labor 301 E. Locust, Suite 130 Des Moines, IA 50309		birth	100.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$ 125.00

TOTAL (If last page of this schedule)

\$ 125.00

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)